The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA/ EP

## PCT

**CHAPTER II** 

### **DEMAND**

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty.

| For   | r International Preliminar                                       | y Examining Authorit                       | y use only  |  |  |  |
|---|--|--|---|--|--|--|
| VI VIG VI STREA   |  | Date of receipt of DEMAND                  |   |  |  |  |
| Identification of IPEA  |  | Date of receipt of D                       | JEMAND  |  |  |  |
| Box No. I IDENTIFICATION OF THE INTERNATIONAL A   |  | , APPLICATION                              | Applicant's or agent's file reference PDF 0312/02 (PCT) |  |  |  |
| International application No. PCT/GB2004/005275   | International filing date<br>16/12/2                             |  | (Earliest) Priority date (day/month/y-ear) 23/12/2003   |  |  |  |
| Title of invention A Method for Secure Operation of a Computing Device  |  |  |   |  |  |  |
| Box No. II APPLICANT(S)   |  |  |   |  |  |  |
| Name and address: (Family name followed by g<br>The address must include po   | given name; for a legal entity, postal code and name of country, | full official designation.                 | Telephone No.<br>+44 (0) 20 7154 1797                   |  |  |  |
| Symbian Software Limited<br>2-6 Boundary Row  |  |  | Facsimile No.<br>+44 (0) 20 7154 1861                   |  |  |  |
| LONDON SE1 8HP<br>GB  |  |  | Teleprinter No.   |  |  |  |
|   |  |  | Applicant's registration No. with the Office            |  |  |  |
| State (that is, country) of nationality:  GB  |  | State (that is, country) of residence:  GB |   |  |  |  |
| Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country.)  CLARKE, Leon  C/o- Symbian Software Limited  2-6 Boundary Row  LONDON SE1 8HP  GB |  |  |   |  |  |  |
| State (that is, country) of nationality:<br>GB  |  | y) of residence:                           |   |  |  |  |
| Name and address: (Family name followed by given nome; for a legal entity, full official designation. The address must include postal code and name of country) HEATH, Graig C/o- Symbian Software Limited 2-6 Boundary Row LONDON SE1 8HP GB       |  |  |   |  |  |  |
| State (that is, country) of nationality:<br>GB  |  | State (that is, country) GB                | of residence:   |  |  |  |
| Further applicants are indicated on a continuation sheet.   |  |  |   |  |  |  |

| Sheet No 2  | International application No.            |  |  |  |  |  |
|---|--|--|--|--|--|--|
| BOX NO. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE   |  |  |  |  |  |  |
| The following person is agent common representative   |  |  |  |  |  |  |
| and 🗶 has been appointed earlier and represents the applicant(s) also for international processing and large earlier and represents the applicant (s) also for international processing and large earlier and represents the applicant (s) also for international processing earlier and represents the applicant (s) also for international processing earlier and represents the applicant (s) also for international processing earlier and represents the applicant (s) also for international processing earlier | reliminary examination.                  |  |  |  |  |  |
| is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.   |  |  |  |  |  |  |
| is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.  |  |  |  |  |  |  |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)  | Telephone No.<br>+44 (0) 20 7154 1851    |  |  |  |  |  |
| SORENTI, Gino   | Facsimile No.                            |  |  |  |  |  |
| Symbian Software Limited  | +44 (0) 20 7154 1861                     |  |  |  |  |  |
| 2-6 Boundary Row  | Teleprinter No.                          |  |  |  |  |  |
| LONDON SE1 8HP  |  |  |  |  |  |  |
| GB  | Agent's registration No. with the Office |  |  |  |  |  |
| Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.   |  |  |  |  |  |  |
| Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION  |  |  |  |  |  |  |
| Statement concerning amendments:*   |  |  |  |  |  |  |
| 1. The applicant wishes the international preliminary examination to start on the basis of  | •  |  |  |  |  |  |
| the international application as originally filed   |  |  |  |  |  |  |
| the description as originally filed   |  |  |  |  |  |  |
| as amended under Article 34   |  |  |  |  |  |  |
| the claims as originally filed  |  |  |  |  |  |  |
| as amended under Article 19 (together with any accompany)   | a ctatement)                             |  |  |  |  |  |
| as amended under Article 19 (together with any accompany)   | g statement)                             |  |  |  |  |  |
|   |  |  |  |  |  |  |
| the drawings as originally filed  |  |  |  |  |  |  |
| as amended under Article 34   |  |  |  |  |  |  |
| 2. The applicant wishes any amendment to the claims under Article 19 to be consider   | ered as reversed.                        |  |  |  |  |  |
| 3. Where the IPEA wishes to start the international preliminary examination at the same time as the international search in accordance with Rule 69.1(b), the applicant requests the IPEA to postpone the start of the international preliminary examination until the expiration of the applicable time limit under Rule 69.1(d).  |  |  |  |  |  |  |
| 4. The applicant expressly wishes the international preliminary examination to start earlier than at the expiration of the applicable time limit under Rule 54bis.1(a).   |  |  |  |  |  |  |
| * Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.   |  |  |  |  |  |  |
| Language for the purposes of international preliminary examination: ENGLISH   |  |  |  |  |  |  |
| which is the language in which the international application was filed.   |  |  |  |  |  |  |
| which is the language of a translation furnished for the purposes of international search.  |  |  |  |  |  |  |
| which is the language of publication of the international application.  |  |  |  |  |  |  |
| which is the language of the translation (to be) furnished for the purposes of international preliminary examination.   |  |  |  |  |  |  |
| Box No. V ELECTION OF STATES  |  |  |  |  |  |  |
| The filing of this demand constitutes the election of all Contracting States which are designated and are bound by Chapter II of the PCT.   |  |  |  |  |  |  |

|   | She  | et No 3   | International application No.   |  |  |  |
|---|--|---|---|--|--|--|
| Box No. VI CHECK LIST   |  |   |   |  |  |  |
| The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:  |  |   | For International Preliminary Examining Authority use only received not received  |  |  |  |
| 1. translation of international application   | :  | sheets  |   |  |  |  |
| 2. amendments under Article 34  | :  | sheets  |   |  |  |  |
| <ol> <li>copy (or, where required, translation) of<br/>amendments under Article 19</li> </ol>   | :  | sheets  |   |  |  |  |
| <ol> <li>copy (or, where required, translation) of<br/>statement under Article 19</li> </ol>  | :  | sheets  |   |  |  |  |
| 5. letter   | :  | S sheets  |   |  |  |  |
| 6. other (specify) working copy   | :  | sheets  |   |  |  |  |
| The demand is also accompanied by the item(s) marked below:   |  |   |   |  |  |  |
| l. X fee calculation sheet  |  |   |   | aining lack of signature   |  |  |
| 2. original separate power of attorney  |  | 6. sequence listing in electronic form                  |   |  |  |  |
|   | original general power of attorney  7. tables in electronic form related to a sequence listing |   |   |  |  |  |
| <ol> <li>copy of general power of attorney;<br/>reference number, if any:</li> </ol>  |  | 8. other (specify):                                     |   |  |  |  |
| Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE  Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).                                       |  |   |   |  |  |  |
| SORENTI, Gino Patent Attorney Symbian Software Limited  |  |   |   |  |  |  |
|   |  |   |   |  |  |  |
|   | al Preliminar  | ry Examining Authority use                              | only  |  |  |  |
| Date of actual receipt of DEMAND:  2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):   |  |   |   |  |  |  |
| The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.  6. The date of receipt of the demand is AFT expiration of the time limit under Rule 54bis. Item 7 or 8, below, does not apply.           |  |   | ile 54 <i>bis</i> . I(a) and  |  |  |  |
| The applicant has been informed as  The date of receipt of the demand is WITH limit of 19 months from the priority date a by virtue of Rule 80.5.  Although the date of receipt of the demand expiration of 19 months from the priority delay in arrival is EXCUSED pursuant to | IN the time<br>s extended<br>is after the<br>y date, the                                       | limit under I Rule 80.5.  8. Although the expiration of | eceipt of the demand is Rule 54 <i>bis</i> . 1(a) as exte e date of receipt of the defined time limit under Reval is EXCUSED purs | nded by virtue of lemand is after the ule 54 <i>bis</i> .1(a), the |  |  |
| For International Bureau use only   |  |   |   |  |  |  |
| Demand received from IPEA on:   |  |   |   |  |  |  |

**CHAPTER II** 

# **PCT**

### FEE CALCULATION SHEET

#### Annex to the Demand

|  | For International Preliminary Examining Authority use only |  |  |  |  |
|--|--|--|--|--|--|
| International application No.  |  |  |  |  |  |
| Applicant's or agent's file reference PDF 0312/02 (PCT)  | Date stamp of the IPEA                                     |  |  |  |  |
| Applicant  |  |  |  |  |  |
| Symbian Software Limited   |  |  |  |  |  |
| CALCULATION OF PRESCRIBED FEES   |  |  |  |  |  |
| 1. Preliminary examination fee   | 1530.00 Euro P   |  |  |  |  |
| 2. Handling fee (Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.) | 129.00 Euro H  |  |  |  |  |
| 3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box  | 1659.00 Euro   |  |  |  |  |
| MODE OF PAYMENT  |  |  |  |  |  |
| authorization to charge deposit account with the IPEA (see below)  cheque revenue stampostal money order coupons  bank draft other (specify,   |  |  |  |  |  |
| AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT  (This mode of payment may not be available at all IPEAs)  IPEA/ EP  |  |  |  |  |  |
| Authorization to charge the total fees indicated above.  | Deposit Account No.: 28050566                              |  |  |  |  |
| (This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.                           | Name: Sophia Koen Signature:                               |  |  |  |  |
|  |  |  |  |  |  |